MODULE 1

Managing Common Misconceptions about the Role of an Ethics Consultant

	By the end of this session, participants will be able to:	
OBJECTIVES	Identify common misconceptions about the role of ethics consu	ultants.
	☐ Describe skills that ethics consultants need to manage miscone	ceptions.
ECT	☐ Practice techniques to manage misconceptions.	
OBJI		
	For the session:	
SES	☐ Slide presentation, laptop, and projector	
URG	☐ Participant Handouts	
RESOURCES	☐ CASES pocket cards	
RE		
z	☐ Gather training resources and read through the session plan.	
PREPARATION	☐ Ensure that the laptop and projector are functioning properly.	
RA		
EP⊅		
PR		
	SECTIONS	DURATION (MINUTES)
	1 Introduction	2
Ш	2 Understanding the Ethics Consultant's Role	13
OUTLINE	Using Role-plays to Manage Common Misconceptions about the Ethics Consultant's Role	70
0	4 Takeaways	5
	Total session time	90 minutes



U.S. Department of Veterans Affairs

Veterans Health Administration National Center for Ethics in Health Care

1. Introduction (2 minutes)

Ethics Consultation Beyond the Basics

NOTE: Have this slide up before the session begins.

SAY:

Welcome to Ethics Consultation: Beyond the Basics.

CLICK.

Slide 2

Module 1

Managing Common
Misconceptions about the Role
of an Ethics Consultant

SAY:

Misconceptions about the role of an ethics consultant are common. If misconceptions are not effectively managed early in the consultation process, they often lead to dissatisfaction and conflict later on. In this session, we will focus on the first encounter between the ethics consultant and the requester. You will learn how to recognize and respond to common misconceptions about the ethics consultant's role.

CLICK.

Slide 3

Learning Objectives

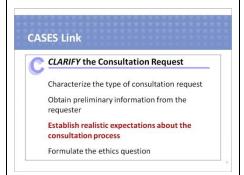
- Identify common misconceptions about the role of ethics consultants.
- Describe skills that ethics consultants need to manage misconceptions.
- · Practice techniques to manage misconceptions.

SAY:

Being familiar with common misconceptions about the role of an ethics consultant and establishing *realistic* expectations will help start the consultation on the right track. First, we're going to review some of the misconceptions about what an ethics consultant does and doesn't do. Then, we will discuss the skills you'll need in your interactions with the requester. Finally, by role-playing as the Consultant, the Requester, and the Observer during mock consultation requests, you'll have a chance to practice listening and communicating to manage and correct these misconceptions.

CLICK.

Slide 4



SAY:

Please take out your CASES pocket card. It outlines the major steps and substeps of CASES, which is the IntegratedEthics model for performing ethics consultation.

This module falls under Step 1 of the CASES approach, "CLARIFY the Consultation Request," and specifically within the third substep that requires consultants to "establish realistic expectations about the consultation process." You can see where managing misconceptions about the role of ethics consultants fits into the CASES approach.

The next slides will walk you through some of the most common misconceptions about the ethics consultant's role. They are listed both on the slides and in **Handout 1.1:**Common Misconceptions about the Ethics

Consultant's Role. Many of these will probably be familiar to you.

CLICK.

Understanding the Ethics Consultant's Role (13 minutes)

Slide 5

Common Misconceptions about the Ethics Consultant's Role

It is a misconception that an ethics consultant will:

- · Investigate an allegation of serious misconduct.
- Rubber stamp what the health care team wants or what the patient/family wants.
- · Clean up a "mess."
- · Conduct a medical evaluation.
- · Make a treatment plan.
- · Tell the requester what is legal.

SAY:

Sometimes people—either staff or patients or family members—might think that the ethics consultant will:

· Investigate an allegation of serious misconduct.

It is not the role of the ethics consultant to serve as the "ethics police" or to investigate allegations of crimes or other serious transgressions of legal or professional standards. For example, a request about what to do about staff stealing narcotics requires an investigation.

Rubber stamp what the health care team wants or what the patient/family wants.

Likewise, ethics consultants should *never* give the impression that they will rubber stamp a decision that has been made by one party. Instead, ethics consultants perform a complete ethics consultation in order to determine the ethically justifiable options. For example, a request to ok a provider's decision to discontinue a ventilator.

· Clean up a "mess."

Many ethics consultations involve "messy" cases. However, before agreeing to help "clean up a mess," the ethics consultant should first determine whether there is an ethical concern (i.e., uncertainty or conflict about values). The ethics consultant should tactfully clarify that the role of the ethics consultation service is to help resolve *ethical* concerns. For example, a social worker seeks help with a messy, complicated situation between patient, family and team.

Conduct a medical evaluation.

It is NOT the role of the ethics consultant to conduct a medical evaluation (such as determining if a patient is brain dead or in a persistent vegetative state). Instead, the ethics consultant should offer to assist with *ethical* concerns relating to these diagnoses.

Make a treatment plan.

Health care professionals who serve as ethics consultants should be careful to distinguish the various roles they play and NOT perform two different roles at the same time. For example, a dietician should not give advice about diet options.

· Tell the requester what is legal.

Ethics consultants should NOT give legal advice—not even advice about laws related to ethics, such as government ethics rules. They should refer these questions to an appropriate attorney. For example, is it legal for the family sell Dad's car while he is in a coma?

CLICK.

Slide 6

Common Misconceptions about the Ethics Consultant's Role

It is a misconception that an ethics consultant will:

- · Tell the requester what to do.
- Talk to the family (or other party) so that the provider doesn't have to.
- Take the decision out of the hands of the family (or staff).
- Never report anything to authorities.

SAY:

In addition, some people may think that the ethics consultant will:

Tell the requester what to do.

It is NOT the role of the ethics consultant to tell others what to do, but to support and assist the appropriate decision-maker(s) in the case, including the doctor, the patient, the patient's family, and the health care team.

 Talk to the family (or other party) so the provider doesn't have to.

Ethics consultants should not take on the communication responsibilities of health care providers. Ethics consultants may be able to help providers with difficult discussions, but should not do the talking on the provider's behalf.

 Take the decision out of the hands of the family (or staff).

The role of the ethics consultant is NOT to make decisions, but to help the appropriate decision maker(s) in the case. If during the conversation it becomes clear that the requester thinks that the ethics consultant is "the decision maker," the ethics consultant should correct that misconception.

· Never report anything to authorities.

While ethics consultants have a general duty of confidentiality, they need to report certain things (such as suicidal or homicidal threats) to appropriate authorities. The limits of confidentiality should be clarified up front.

CLICK.

Slide 7

Common Misconceptions about the Ethics Consultant's Role

It is a misconception that an ethics consultant will:

- · Tell someone he or she is being unethical.
- Get the patient, doctor, nurse, or family to see things the requester's way.

SAY:

The last 2 misconceptions you may encounter are that ethics consultants will:

Tell someone he or she is being unethical.

The role of the ethics consultant is to determine what decisions or actions are ethically justifiable, but it is up to the employee's supervisor or other authorized body to evaluate and address an employee's ethical performance.

Get the patient, doctor, nurse, or family to see things the requester's way.

Often a party who is involved in a conflict is frustrated that others do not see things his or her way and turns to the ethics consultation service for help. The ethics consultant should be careful to remain neutral and not to take sides. Instead, the consultant should attempt to resolve the ethical concern with all involved parties.

In a few minutes, you'll have a chance to practice how you would manage some of these misconceptions but, first, let's examine some skills you'll need in your interactions with the requester.

CLICK.

Slide 8

Skills

The ethics consultant should:

- Listen well.
- Demonstrate empathy.
- Use non-verbal behaviors to enhance communication.
- Explain the ethics consultation process.
- Emphasize how you can be of service.
- Remain neutral.

SAY:

The first skill is to:

· Listen well.

Conflict is especially likely to arise when 1 or more parties feel that they have not been heard. It is critical for consultants to listen well and demonstrate to the requester that they have been heard and understood.

Demonstrate empathy.

Ethics consultants need to be able to convey that they identify with the requester and their concerns.

Use non-verbal behaviors to enhance communication.

It is important for ethics consultants to make eye contact, ensure privacy, not appear rushed, and turn off pagers and cell phones.

Explain the ethics consultation process.

The ethics consultant should clarify the goals of ethics consultation, the expected time frame for the process, and the specific actions the consultant may take.

Emphasize how you can be of service.

Ethics consultants should always let the requester know that they will help as much as they can within their role as consultants. Sometimes an ethics consultant will know early on that the requester's expectations cannot be met because of either the nature of the request or misconceptions that the requester holds about ethics consultation. Nonetheless, ethics consultants should communicate a desire to help. They should emphasize what they will do instead of what they won't do.

Remain neutral.

Ethics consultants should never give the impression that they are taking sides.

CLICK.

Slide 9

Skills

The ethics consultant should:

- · Obtain agreement on how to proceed.
- · Close the conversation with an invitation.

SAY:

Continuing on with our list, the next skill is to:

Obtain agreement on how to proceed.

After the consultant finishes explaining what will and will not be done, it is important to make sure the requester understands and agrees.

Close the conversation with an invitation.

Finally, the ethics consultant should make the requester feel welcome to call again. This is especially important if the consultant redirected the requester to another office or program.

CLICK.

Slide 10

What Is an Ethics Consultant's Role?

To implement the CASES approach:

- · Clarify the consultation request.
- Assemble the relevant information.
- Synthesize the information.
- Explain the synthesis.
- Support the consultation process

SAY:

In the IntegratedEthics model, the role of the ethics consultant is to implement the CASES approach. Using both the skills just mentioned and others that the ethics consultant possesses, the consultant should:

- Clarify the consultation request at the outset.
- Assemble and consider all relevant information, including perspectives from all relevant parties.
- Synthesize the gathered information, including identifying the ethically appropriate decision maker and roles for others in the process, and facilitating the formulation of a plan within an ethically justifiable range of options.
- Explain the synthesis to all relevant parties.
- Support the consultation process by ensuring there is

FACULTY GUIDE

clear follow-up and evaluation.
CLICK.

3. Using Role-plays to Clarify the Role of the Ethics Consultant (70 minutes)

Slide 11

Group Activity Instructions

- 1. Break into groups of 3.
- 2. Review activity instructions and fill in names on the table.
- Prepare for your role in the scenario (1 minute) and do the role-play (4 minutes).
- 4. Debrief the scenario (4 minutes).
- 5. Go to the next role-play, and play the next role you are assigned on the table, and continue as before.

NOTE: Display this slide throughout the activity.

SAY:

In this activity, you're going to get into groups of 3 and practice managing common misconceptions about the role of the ethics consultant. Please form groups now. For this activity, we will be using **Handout 1.1** and **Handout 1.2**: **Managing Common Misconceptions about the Ethics Consultant's Role: 6 Scenarios**.

	ACTIVITY: Using Role-plays to Manage Common Misconceptions about the Role of an Ethics Consultant (Refer to Handouts 1.1 and 1.2)
Groups	Arrange groups of 3. When necessary there may be a 4th person.
Time	6 scenarios total 6 minutes to read scenarios (1 minute each scenario) 24 minutes to enact scenarios (4 minutes each scenario) 24 minutes for small group debrief (4 minutes each scenario) 16 minutes for large group discussion Total: 70 minutes
Before the Activity: Give the following instructions	SAY: There are 6 role-play scenarios, and 3 roles in each scenario: Requester, Consultant, or Observer. Each member of the group will play each role twice. If there is a fourth person in your group, there will be a second observer for each role-play. Please turn to Handout 1.2. You can skip the instructions on the first page; they summarize the activity for participants who may miss our walk-through here. On page 2, you will see 2 tables. If you are a group of, enter the names of each participant—in the same order—on the lines provided on each participant's handout. The participant will play the role as assigned for each scenario. Fill in the names for your group now. Any questions? Now, let's take a quick look at the different pages for the Requester, Consultant, and Observer in Scenario 1. You'll see that the Requester page comes with some background information, a motivation, and a goal. The Consultant page comes with an inkling of the motivation and goal, and a list of do's and don'ts. The Observer page comes with a checklist of behaviors the Consultant should exhibit.

FACULTY GUIDE

ACTIVITY: Using Role-plays to Manage Common Misconceptions about the Role of an Ethics Consultant (Refer to Handouts 1.1 and 1.2) In the first 3 scenarios, the Consultant may refer to the bulleted list of do's and don'ts on the page, and may consult the phrases on Handout 1.1. In scenarios 4-6, the Consultant's page doesn't include the list. This makes the Consultant's role more challenging. You will have 1 minute to read the scenario and prepare for your role and 4 minutes to do the role-play. After each role-play, you will have 4 minutes to debrief. The goal of the debrief is to discuss the effectiveness of the strategies the Consultant used to manage misconceptions. Notice and write down specific statements or actions of the ethics consultant that demonstrate the skills for managing misconceptions, especially those that are new to you that you find useful. When time is called at 9 minutes, move on to the next scenario. Once all 6 scenarios are complete, the large group will get back together for a discussion. Remember: The goal of this activity is to practice managing misconceptions and setting clear expectations for the consultation. Keep in mind that you are not just explaining why what they are asking for is not an ethics consultation or why you are passing the issue along to someone else. You are clarifying what you will do so that the requester will have realistic expectations. Listening carefully is an important part of this activity. Usually when there is a consult request, it means that the requester feels there is an ethical concern, even though the requester may not be articulating it clearly. Part of the consultant's job is to help requesters clarify why they're asking for an ethics consultation. Finally, it's tempting to work through the substance of the request, but resist that temptation and stick to managing misconceptions. Any questions? **During the** Call time every 9 minutes and remind groups to move on to the next scenario. **Activity:** Move around the room, paying close attention to how the role-plays and Monitor debriefs are going. Groups may need reminders to rotate roles and to stick with managing misconceptions. Feel free to join a group if members seem to need immediate help in getting back on track in the role-play or if the debrief has become irrelevant or contentious. Also, make note of problems you observe, e.g., the Consultant says something off-putting to the Requester. If you have joined in the debrief, you might discuss a problem you see and/or plan to bring it up in the large group discussion later—without identifying participants involved. **Following** Facilitate a discussion with/among participants about the activity using the questions on the next slide. the Activity: Debrief

ACTIVITY: Using Role-plays to Manage Common Misconceptions about the Role of an Ethics Consultant (Refer to Handouts 1.1 and 1.2)	
CLICK to the next slide.	

Slide 12

Discussion

- How did playing these roles differ from what you are used to doing as a consultant?
- How did awareness of the misconceptions change your approach to the scenarios?
- How will this experience affect your future consultations?
- What tips did you learn from your colleagues?

ASK:

- First, how did playing these roles—having achieved an awareness of the common misconceptions of the role of an ethics consultant—differ from what you are used to doing as a consultant?
- Can anyone describe how awareness of the misconceptions changed your approach to the scenarios?
- · How will this experience affect your consultations?
- Can anyone give the group a tip that you learned from a colleague about managing common misconceptions about the role of an ethics consultant during this activity?

CLICK.

Module 1—Managing Common Misconceptions about the Role of an Ethics Consultant

4. Takeaways (5 minutes)

Slide 13

Takeaways

Managing common misconceptions about the role of an ethics consultant

- · 12 common misconceptions (An ethics consultant will investigate an allegation of serious misconduct, clean up a "mess," conduct a medical evaluation,
- · 8 communication skills
- (Listen well, demonstrate empathy, remain neutral, etc.)
- · Practice identifying and managing misconceptions

NOTE: This slide is animated.

SAY:

Let's spend a couple of minutes to reflect on what you will take away from this session.

ASK:

What struck you as most important for your work as an ethics consultant?

ELICIT ANSWER(S): Answers may include any responses participants make. Take 2 or 3 responses, and as many more as time allows. Acknowledge each response.

SAY:

We have touched upon many concepts in this module. Hopefully, you have the materials you need to bring them all back to mind when you return to the job. Here they are, summarized.



CLICK to fly in the summarized concepts.

CLICK.

Slide 14



Questions?

ETHICS





NOTE: Answer any questions and conclude the session with appreciation for the work participants have done and anything you want to say about your experience of the time you have spent with them.